

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 762380	RECEIPT DATE:	02 / 07 / 01
IA NUMBER:	PCT/ JP00 / 03620	IA FILING DATE:	06 / 05 / 00
FAMILY NAME:	YAGUCHI	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	YOSHITAKA	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	06 / 05 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	MTS-3243US	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 6104070700
			FAX

NAME: ALLAN RATNER

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CITY: VALLEY FORGE

STATE/COUNTRY: PA ZIP: 19482

EMAIL:

APPLICATION TITLES:

RECORDING AND REPRODUCING APPARATUS MPEG IMAGE STREAM RECORDING AND RE
PRODUCING APPARATUS AND MEDIUM

TAB TO LAST POSITION,PUSH SEND



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WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 3996

SERIAL NUMBER 09/762,380	FILING DATE 02/07/2001 RULE	CLASS 386	GROUP ART UNIT 2615	ATTORNEY DOCKET NO. MTS-3243US	
APPLICANTS Yoshitaka Yaguchi, Osaka, JAPAN; Toshikazu Kodo, Hyogo, JAPAN; Yoshiki Kuno, Osaka, JAPAN;					
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/JP00/03620 06/05/2000					
** FOREIGN APPLICATIONS ***** JAPAN HEI11-160,076 06/07/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY JAPAN	SHEETS DRAWING 13	TOTAL CLAIMS 51	INDEPENDENT CLAIMS 12
ADDRESS Allan Ratner Ratner & Prestia One Westlakes Berwyn Suite 301 PO Box 980 Valley Forge ,PA 19482-0980					
TITLE Recording/reproducing device, mpeg video stream recording/reproducing device, and medium					
FILING FEE RECEIVED 3650	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		